

AMENDED IN ASSEMBLY AUGUST 6, 2013

AMENDED IN SENATE MAY 28, 2013

AMENDED IN SENATE APRIL 24, 2013

**SENATE BILL**

**No. 800**

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**Introduced by Senator Lara**

February 22, 2013

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An act to amend Section 12739.61 of, and to add Part 6.8 (commencing with Section 12739.77) to Division 2 of, the Insurance Code, and to add Section 14005.275 to the Welfare and Institutions Code, relating to health, and declaring the urgency thereof, to take effect immediately.

LEGISLATIVE COUNSEL'S DIGEST

SB 800, as amended, Lara. ~~California Health Benefit Exchange: outreach services.~~ *Health care coverage programs: transition.*

Existing law creates various programs to provide health care services to persons who ~~have limited incomes and~~ meet various eligibility requirements. These programs include the Healthy Families Program, *the Access for Infants and Mothers Program, the County Health Initiative Matching Fund, the Major Risk Medical Insurance Program, and the Federal Temporary High Risk Pool*, all administered by the Managed Risk Medical Insurance Board, and the Medi-Cal program administered by the State Department of Health Care Services. Existing law provides for the transition of specified enrollees of the Healthy Families Program to the Medi-Cal program, to the extent that those individuals are otherwise eligible. *Existing law also provides that employees of the board whose functions are transferred to the Medi-Cal program pursuant to that transition retain their positions, status, and*

*rights. Existing law requires the board, beginning July 1, 2013, to cease the provision of health coverage through the Federal Temporary High Risk Pool, except as specified.*

Existing law establishes the California Health Benefit Exchange (Exchange), and requires the ~~board governing the~~ Exchange to facilitate the purchase of qualified health plans through the Exchange by qualified individuals and small employers by January 1, 2014. Existing law also requires the ~~board~~ Exchange to undertake activities necessary to market and publicize the availability of health care coverage and federal subsidies through the Exchange and to undertake outreach and enrollment activities.

This bill would require the State Department of Health Care Services to provide the Exchange with specified contact information of individuals who are not enrolled in Medi-Cal but who are the parents or caretakers of children enrolled in the Healthy Families Program or the Medi-Cal program due to a transition from the Healthy Families Program, as specified, for purposes of assisting the Exchange to conduct outreach to individuals potentially eligible for a state health subsidy program, as defined.

*This bill would transfer to the Exchange any civil service employee of the board assigned to the Federal Temporary High Risk Pool and would provide that each transferred employee shall retain his or her status, position, and rights.*

*The bill would also provide that, if the board is dissolved or terminated, all employees assigned to the other programs administered by the board shall be transferred to the State Department of Health Care Services and each transferred employee shall retain his or her status, position, and rights. The bill would provide that any employee's reinstatement rights that would have applied to the board shall instead apply to the department.*

This bill would declare that it is to take effect immediately as an urgency statute.

Vote:  $\frac{2}{3}$ . Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     SECTION 1. Section 12739.61 of the Insurance Code is  
2     amended to read:

12739.61. (a) The board shall cease to provide coverage through the program on July 1, 2013, except as required by the contract between the board and the United States Department of Health and Human Services, and at that time shall cease to operate the program except as required to complete payments to, or payment reconciliations with, participating health plans or other contractors, process appeals, or conduct other necessary termination activities.

(b) Any permanent or probationary civil service employee who is employed by the board and assigned to the program and whose function ceases due to this section shall immediately be transferred to the California Health Benefit Exchange and shall retain his or her status, position, and rights pursuant to Section 19050.9 of the Government Code and the State Civil Service Act (Part 2 (commencing with Section 18500) and Part 2.6 (commencing with Section 19815) of Division 5 of Title 2 of the Government Code).

SEC. 2. Part 6.8 (commencing with Section 12739.77) is added to Division 2 of the Insurance Code, to read:

PART 6.8. PROGRAM TRANSFERS

12739.77. For the purposes of this part, the following terms have the following meanings:

(a) "Board" means the Managed Risk Medical Insurance Board.

(b) "Employee" means permanent or probationary civil service employee.

12739.78. (a) If any statute dissolves or terminates the board, any employee of the board who, immediately prior to the effective date of the dissolution or termination of the board, was assigned to the Healthy Families Program (Part 6.2 (commencing with Section 12693)), the Access for Infants and Mothers Program (Part 6.3 (commencing with Section 12695)), the County Health Initiative Matching Fund (Part 6.4 (commencing with Section 12699.50)), or the Major Risk Medical Insurance Program (Part 6.5 (commencing with Section 12700)) shall be transferred to the State Department of Health Care Services and shall retain his or her status, position, and rights pursuant to Section 19050.9 of the Government Code and the State Civil Service Act (Part 2 (commencing with Section 18500) and Part 2.6 (commencing with Section 19815) of Division 5 of Title 2 of the Government Code).

(b) (1) If any statute dissolves or terminates the board, any employee of the board who, immediately prior to the effective date of the dissolution or termination of the board, was assigned to the Federal Temporary High Risk Pool (Part 6.6 (commencing with Section 12739.5) and Part 6.7 (commencing with Section 12739.70)) shall be transferred to the California Health Benefit Exchange and shall retain his or her status, position, and rights pursuant to Section 19050.9 of the Government Code and the State Civil Service Act (Part 2 (commencing with Section 18500) and Part 2.6 (commencing with Section 19815) of Division 5 of Title 2 of the Government Code).

(2) This subdivision shall not apply to any employee who has transferred to the California Health Benefit Exchange pursuant to subdivision (b) of Section 12739.61.

(c) If any statute dissolves or terminates the board, an employee's applicable reinstatement rights that would have applied to the board shall instead apply to the State Department of Health Care Services.

~~SECTION 1.~~

SEC. 3. Section 14005.275 is added to the Welfare and Institutions Code, immediately following Section 14005.27, to read:

14005.275. In order to assist the California Health Benefit Exchange, established pursuant to Title 22 (commencing with Section 100500) of the Government Code, to conduct outreach to individuals potentially eligible for a state health subsidy program, as defined in Section 15926, the department shall provide the California Health Benefit Exchange, or its designee, with the names, addresses, email addresses, telephone numbers, or other contact information, and written and spoken languages of individuals who are not enrolled in Medi-Cal but are the parents or caretakers of children enrolled in the Healthy Families Program or the Medi-Cal program pursuant to Section 14005.27.

~~SEC. 2.~~

SEC. 4. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the Constitution and shall go into immediate effect. The facts constituting the necessity are:

To ensure ~~that~~ the smooth and timely transition of public employees and individuals who are eligible for state health subsidy

1 ~~programs receive information about those programs~~ before the  
2 California Health Benefit Exchange will begin making health care  
3 coverage available in January 2014, it is necessary that this ~~bill~~  
4 *act* take effect immediately.

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